

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Ultimate Business Solutions
c/o Legal Department
815 West 1st Avenue, Suite 146
Mesa, AZ 85202

2. Article Number

(Transfer from service label)

7006 0100 0000 0733 2526

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☒ Addressee

B. Received by (Printed Name)

Mark Wilken

C. Date of Delivery

11-6

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

10600 797-MHT

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes